

Exhibit I

—5-15-18-MD-15-02641-PHX-DGC-Jones-Jury Trial-Day 1—

1 times since Dr. Grassi's pioneering work in the original ones.
2 And these guidelines recognize, as the medical community do,
3 that there are complications with these devices, all devices,
4 not just Bard's.

5 And these guidelines show, if you will look at the 03:45PM
6 third line, that filter fracture, the complication that Ms.
7 Jones unfortunately sustained, occur in 2 to 10 percent of
8 patients. Why the doctors keep implanting these in patients
9 when they know, and the medical community knows they can
10 fracture that often, the evidence will show, you because they 03:46PM
11 decide, day in and day out, that the life-threatening nature of
12 a pulmonary embolism is so great that the lifesaving benefit of
13 the device outweighs its risks.

14 Now, these IVC filters are not just somebody snaps
15 their fingers at Bard Peripheral in Tempe and starts selling 03:46PM
16 them. It is a long process to get clearance from the FDA to
17 sell these. Bard must demonstrate that a device that is
18 developing and wants to sell is substantially equivalent to an
19 earlier already cleared device.

20 Now, the FDA has a wealth of experience with inferior 03:46PM
21 vena cava filters. Two decades ago in 1996 the FDA carefully
22 weighed the risks and benefits of all these devices, not
23 looking at Bard filters but all filters. And the FDA
24 recognized in assessing these devices that all filters present
25 the risk of complications and recognized that many of these 03:47PM